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1638

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Applicati n Number	09/831,233					
Filing Date	SEPTEMBER 14, 2001					
First Named Inv nt r	STEPHEN M. ALLEN ET AL.					
Group Art Unit	1638					
Examiner Name	UNKNOWN					
Attorney Docket Number	BB1129USPCT					

☑ A Power of Attorney or Authorization of Agent is submitted herewith. OR ☐ Please change the correspondence address for the above-identified application to: *23906* FATENT TRADEMARK OFFICE **COUNTY OF	I hereby revoke all previous powers of attorney or authorizations of agent given in the above- identified application:							
OR □ Irim or Individual Name Address City Country Telephone I am the: □ Applicant/Inventor. ☑ Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Barbara J. Massie Signature Date 7 - 28 - 2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	OR							
Individual Name Address City Country Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Barbara J. Massie Signature Date 7.28-2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	PATENT TRADEMARK OFFICE							
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Country Country Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Barbara J. Massie Signature Date 7-28-2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Barbara J. Massie Signature 1-28-2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Address							
Telephone Fax	City						-	
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□ Applicant/Inventor. □ Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Barbara J. Massie Signature □ Applicant □ Ap	Telephone			Fax				
Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Barbara J. Massie Signature Date 7-28-2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	I am the:							
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Date 7-28-2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Name	Name Barbara J. Massie						
Date 7-28-2003 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Signature	Signature Baltana () Massage						
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A I' - A' No b	09/831,233	\
Application Number		_
Filing Dat	SEPTEMBER 14, 2001	
First Named Inv ntor	STEPHEN M. ALLEN ET AL.	-
Title	PLANT GLUTAMINE AMIDOTRANSFERASE HOMOLOGS	
Group Art Unit	1638	
Examiner Name	UNKNOWN	
Attorney Docket Number	BB1129USPCT	

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SIGNATURE of Applicant or Assignee of Record									
Name	Name BARBARA J. MASSIE								
Signature	Signature Parlana Massie								
Date 7-28-2003									
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.									
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Appl	icant/F	ater	nt Owner:	E.I. du Po	nt de <u>Ner</u>	mours and Co	mpany		
Appl	ication	No.	Patent No.	: _09/831,2	233		Filed/Issue D	ate:	SEPTEMBER 14, 2001
Entit	led: _	PLA	NT GLUTA	MINE AMI	OTRAN	ISFERASE HO	OMOLOGS		
	E.I. du		t de Nemo Company	urs and ,	a		CORPO	ORAT	ion ,
		(Name	e of Assignee)		(Туг	oe of Assignee, e.	g., corporation, part	tnership,	university, government agency, etc.)
state	es that	it is:							
1.	1. The assignee of the entire right, title, and interest; or								
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In t	the pat	ent a	application/	patent iden	ified abo	ve by virtue of	either:		
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			The doo	cument was	recorde	d in the United	States Patent	and T	rademark Office at
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		7.	28-200	53				BAF	RBARA J. MASSIE
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APPLICATION NO: 09/831,233
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